



Honoring Yesterday. Building Tomorrow.



**DIRECT PAYMENT ENROLLMENT FORM FOR UTILITY BILLS**

**(Please Print)**

Name: \_\_\_\_\_

Service Address: \_\_\_\_\_

Mailing Address (if different than mailing address): \_\_\_\_\_

\_\_\_\_\_

Daytime Phone #: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

This request is for:

Utility Billing Account Number: \_\_\_\_\_

**To ensure the correct account number for your electronic payments and/or to obtain the ABA routing number, contact your financial institution.**

Financial Institution: \_\_\_\_\_

ABA Routing Number: \_\_\_\_\_

(9 digit number located in the lower left corner of your check)

Checking Account Number: \_\_\_\_\_ **(Attach a voided check from this account)**

I authorize the Township of Lyon to deduct my utility bill payments from my checking account listed above.

**I understand that I control my payments and if at any time I decide to discontinue this service, I will notify the Charter Township of Lyon.**

I also understand that all information provided here will remain confidential.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**(This form cannot be processed without your signature)**

58000 Grand River Ave. New Hudson, MI 48165 Phone 248.437.2240

John Dolan *Supervisor* - Patricia D. Carcone *Treasurer* - Michele Cash *Clerk*

Lise Blades *Trustee* - Kristofer Enlow *Trustee* - John Hicks *Trustee* - Sean O'Neil *Trustee*

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